

EDITOR'S MISCELLANY



DRAFT OF A BILL FOR THE REGISTRATION OF TRAINED NURSES.—From the *British Journal of Nursing*, with annotations in italics:

TITLE.

AN ACT to regulate the qualifications of Trained Nurses and to provide for their Registration.

WHEREAS it is expedient that persons requiring nursing assistance should be enabled to distinguish qualified from unqualified nurses: Be it therefore enacted by the King's most Excellent Majesty, by and with the advice and consent of the Lords Spiritual and Temporal, and Commons, in this present Parliament assembled, and by the authority of the same, as follows:

1. This act may for all purposes be cited as "The Nursing Act."

2. This act shall commence and take effect from the first day of October One thousand nine hundred and——

The name of the act as suggested by the members of the Society for the State Registration of Trained Nurses is comprehensive and exact.

CONSTITUTION OF GENERAL NURSING COUNCIL.

3. A council which shall be styled "The General Council of Nursing Education and Registration of the United Kingdom," hereinafter referred to as the General Nursing Council, shall be established as a body corporate by the name aforesaid having a perpetual succession and a common seal, with capacity to purchase and hold, sell, or dispose of property and land for the purposes of this act.

4. The General Nursing Council shall consist of:

Two persons to be appointed by his Majesty with the advice of his Privy Council, of whom one shall be a registered medical practitioner, and one shall be a nurse;

Two registered medical practitioners to be appointed by the General Council of Medical Education and Registration of the United Kingdom;

Six representatives of educational bodies, that is, the nurse-training schools, who must be actively engaged in the teaching of nursing, one to be elected for Scotland and one for Ireland;

Three past or present hospital matrons to be appointed by the Matrons' Council of Great Britain and Ireland;

One nurse to be appointed by the Queen Victoria's Jubilee Institute for Nurses;

One nurse to be appointed by the Royal British Nurses' Association;

Six nurses to be elected by the registered nurses resident in England and Wales;

Two nurses to be elected by the registered nurses resident in Scotland;

Two nurses to be elected by the registered nurses resident in Ireland; and of A president, who shall be a registered nurse, to be elected by the General Council.

The nurses appointed as aforesaid shall be eligible to be, and shall in due course be, registered under the provisions of this act.

The constitution of this council is a matter of primary importance, because, as will be seen by reference to Clause 12 (the Duties and Powers of the Council), it is made under the proposed act the governing body of the nursing profession.

The essential principles incorporated in the formation of the council should be carefully noted.

In accordance with established custom, the government of the country must have representation on such a council; provision is therefore made for the appointment of two nominees of the Privy Council.

As the work of nursing is so intimately connected with that of medicine, due recognition is accorded to the right of the medical profession to representation on the council.

The educational bodies, the nurse-training schools, which have control over nurses during the probationary period, and will be responsible for preparing them for examination by a central board, have a right to help to define the educational curriculum adopted by the council.

Under this clause either matrons, medical lecturers on the theory of nursing, or sisters who are engaged in the practical instruction of probationers would be eligible.

Hospital matrons are given direct representation through the only organization of matrons,—the Matrons' Council,—thus securing to them a proportion of seats on the governing body, to which they might or might not be elected as representatives of educational bodies or as the direct representatives of the registered nurses.

The two chartered bodies of nurses, the Queen Victoria's Jubilee Institute and the Royal British Nurses' Association, are each accorded the right to elect a representative.

A most important principle embodied in the bill is the right accorded to the persons governed—i.e., the registered nurses—to select and elect ten representatives to sit on the council. Thus it is to a considerable extent elective, instead of being composed mainly of academic nominees. As such it must appeal periodically to the electorate, a form of constitution calculated to produce the most healthy and progressive tone in the governing body.

ELECTION OF REPRESENTATIVES OF EDUCATIONAL BODIES.

5. The six representatives of educational bodies shall be appointed by the Privy Council.

The only body with authority to discriminate between the diverse claims of the nurse-training schools to representation in the Privy Council, and the appointment of representatives of these educational bodies is accordingly placed in its hands.

ELECTION OF DIRECT REPRESENTATIVES.

6. The aforesaid elected nurses, who shall be termed "direct representatives," shall be elected in the first instance by the votes of such nurses as have been registered under the provisions of this act before the first day of January, 190—, and in future such elected members shall be elected by the whole body of registered nurses in such manner as the General Nursing Council, with the approval of his Majesty's Privy Council, shall from time to time determine.

7. The members of the General Nursing Council shall each be elected and appointed for a term of five years, and shall be capable of reelection and reappointment, and any member may at any time resign his or her office by letter addressed to the president of the said council, and upon the death or resignation

of any member of the said council some other person shall be constituted a member of the said council in his or her place in the manner hereinbefore provided, but shall vacate office at the time the member whose place he or she has taken would have vacated office; but it shall be lawful for the council during such vacancy to exercise the powers hereinafter mentioned.

8. The appointed members of the General Nursing Council shall hold their first meeting within three months from the commencement of this act in such place and at such time as one of his Majesty's Principal Secretaries of State shall appoint, and shall make such rules and regulations as to Section 11, I. (d), as to them shall seem expedient, which rules and regulations shall remain in force until altered at any subsequent meeting; and when such rules have been sanctioned by his Majesty's Privy Council nurses who are eligible under the said rules shall be forthwith registered.

9. In the absence of any rule or regulation as to the summoning of a meeting of the General Council, or in any case of urgency, it shall be lawful for the president to summon a meeting at such time and place as to her shall seem expedient by letter addressed to each member; and at every meeting, in the absence of the president, some other member to be chosen from the members present shall act as president; and all acts of the General Council shall be decided by the votes of the majority of the members present at any meeting, the whole number present not being less than eight; and at all such meetings the president for the time being shall, in addition to her vote as a member of the council, have a casting vote in case of an equality of votes; and the General Nursing Council shall have power to appoint an Executive Committee out of their own body, of which the quorum shall not be less than three, and to delegate to such committee such of the powers and duties vested in the council as the council may see fit.

6. *We have defined the importance of these direct representatives in a previous column.*

7. *The term for which the General Nursing Council has been elected has been fixed at five years, as it was considered that this period was none too long in which to lay the foundations of and organize a legally constituted profession, and subsequently to secure continuity of business.*

9. *This section provides for the appointment of an Executive Committee, which presumably will be a small and active body authorized to deal with routine business.*

APPOINTMENT OF OFFICIALS.

10. The General Council shall appoint one of their number as treasurer. They shall also appoint a registrar, who shall act as secretary of the General Council; the General Council shall also appoint so many clerks and servants as shall be necessary for the purposes of this act; and every person so appointed by the council shall be removable at the pleasure of the council, and shall be paid such salary as the council shall from time to time think fit.

11. It shall be the duty of the registrar to keep a register of trained nurses, which shall be called "the Nursing Register," correct in accordance with the provisions of this act and the orders and regulations of the General Nursing Council, and to erase the names of all registered persons who shall have died, and from time to time to make the necessary alterations in the addresses or qualifications of the persons registered under this act.

The registrar performs her work in accordance with the provisions of the act and the orders and regulations of the General Nursing Council. Their pro-

professional register is therefore controlled by the registered nurses themselves. The importance of the right thus accorded to them cannot be overestimated.

DUTIES AND POWERS OF THE COUNCIL.

12. The duties and powers of the General Nursing Council shall be as follows:

I. To frame rules—(a) regulating their own proceedings; (b) regulating the issue of certificates and the conditions of admission to the register of trained nurses; (c) regulating the course of training and the conduct of examinations, and the remuneration of the examiners; (d) regulating the admission to the register of women already in practice as trained nurses at the passing of this act; (e) regulating, supervising, and restricting within due limits the practice of trained nurses; (f) defining the particulars required to be given in any notice under this act;

II. To appoint examiners;

III. To decide upon the places where, and the times when, examinations shall be held;

IV. To publish annually a register of trained nurses who have been duly certified under this act;

V. To decide upon the removal from the roll of the name of any trained nurse for disobeying the rules and regulations from time to time laid down under this act by the Central Nursing Council or for other misconduct, and also to decide upon the restoration to the roll of the names of any trained nurses so removed;

VI. To issue and cancel certificates.

And generally to do any other act or duty which may be necessary for the due and proper carrying out of the provisions of this act.

Rules framed under this section shall be valid only if approved by the Privy Council.

By carefully studying this clause it will be found that the General Nursing Council will be empowered to consider the present condition of nursing in all its bearings, and after due deliberation to define an educational curriculum, appoint examiners, and control the register of trained nurses.

PROVISION FOR EXISTING NURSES.

13. Any woman who, within two years from the date of this act coming into operation, claims to be certified under this act, shall be so certified provided (1) she holds a three-years' certificate of training from a hospital approved by the General Nursing Council and is of good moral character, or (2) produces evidence of training satisfactory to the council, and that, in addition, at the passing of this act she had been for at least three years in *bonâ fide* practice as a nurse and is of good moral character.

Applicants for registration must produce evidence that they are at least twenty-one years of age.

Under this clause the rights of nurses trained before the present standard of three-years' training and certification became general are safeguarded. Legislation involving rights of this kind is never retrospective, and it is provided that full justice shall be done to existing nurses who have been trained and engaged for three years in the bonâ fide practice of their profession.

FEES AND EXPENSES.

14. There shall be payable by every woman presenting herself for examination or certificate such fee as the General Nursing Council may, with the approval of

the Privy Council, from time to time determine, such fee not to exceed the sum of two guineas. All such fees paid by nurses in practice at the passing of this act and by candidates for examination, and all fines and penalties recovered under this act, shall be paid to the General Nursing Council. The said council shall devote such fees to the payment of expenses connected with the examination and certificate and to the general expenses of the council. The council shall, as soon as practicable after the thirty-first day of December in each year, publish financial statements made up to that date, showing the receipts and expenditure during the year and also the assets and the liabilities of the council at the aforesaid date, which statement shall be audited and certified as correct by an accountant who shall be a member either of the Institute of Chartered Accountants or of the Incorporated Society of Accountants.

15. All moneys payable to the council shall be paid to the treasurer of the council, and shall be applied to defray the expenses of carrying this act into execution.

16. There shall be paid to the members of the council such fees for attendance and such reasonable travelling expenses as shall from time to time be allowed by the General Nursing Council.

The sum of two pounds and two shillings has been suggested as a maximum fee to be paid by candidates for examination and registration.

PENALTIES FOR PERSONATION OR SUBSTITUTION.

17. (1) From and after the first day of October, One thousand nine hundred and ———, any woman who not being certified under this act shall attempt to personate any nurse certified under this act, or who shall take or use the name or title of registered nurse or the abbreviation R.N. (either alone or in combination with any other word or words, or letters), or any name, title, addition, or description implying that she is certified under this act, or is a person specially qualified to practise nursing of the sick, or is recognized by law as a registered nurse, shall be liable on summary conviction to a fine not exceeding ten pounds, or in default thereof to three months' imprisonment.

PENALTY FOR OBTAINING A CERTIFICATE BY FALSE REPRESENTATION.

18. Any woman who procures or attempts to procure a certificate under this act by making or producing, or causing to be made or produced, any false and fraudulent declaration, certificate, or representation, either in writing or otherwise, shall be guilty of a misdemeanor, and shall on conviction thereof be liable to be imprisoned, with or without hard labor, for any term not exceeding twelve months.

PENALTY FOR WILFUL FALSIFICATION OF THE ROLL.

19. Any person wilfully making or causing to be made any falsification in any matter relating to the register of trained nurses shall be guilty of a misdemeanor, and shall be liable to be imprisoned, with or without hard labor, for any term not exceeding twelve months.

20. Any registered nurse thinking herself aggrieved by any decision of the General Nursing Council removing her name from the register of trained nurses may appeal therefrom to the High Court of Justice within three months after the notification of such decision to her; but no further appeal shall be allowed.

Where any person deems herself aggrieved by any determination of any court of summary jurisdiction under this act such person may appeal therefrom to the Court of Quarter Session.

17, 18, 19. *Penalties are asked for in cases (a) of personation and substitution; (b) of obtaining a certificate by false representation; (c) for wilful falsification of the roll, for the protection both of registered nurses and the public.*

20. *Ample provision is made under this clause for a nurse to appeal against any decision of the General Nursing Council for removing her name from the register.*

PROSECUTION OF OFFENCES.

21. Any offences under this act punishable on summary conviction may be prosecuted by authority of the General Nursing Council.

22. This act shall not be construed to affect or apply to the gratuitous nursing of the sick by friends or members of the family, and, also, it shall not apply to any person attending the sick for hire but who does not in any way assume to be a trained or registered nurse.

23. Nothing contained in this act shall be considered as conferring any authority to practise medicine or to undertake the treatment or cure of disease.

22. *Under this clause perfect liberty is secured to the public to employ and remunerate any person as an attendant on the sick so long as such attendants do not assume to be trained or registered nurses.*

23. *This clause provides that a registered nurse shall not assume the practice of medicine, but shall act strictly under medical direction in relation to the treatment and cure of disease.*

IN THE INTERESTS OF THE BILL FOR STATE REGISTRATION TO BE INTRODUCED AT THE PRESENT SESSION OF THE MARYLAND LEGISLATURE.—
To the Nurses of the State of Maryland:

Within the last month meetings were held in Baltimore to which all nurses in the State of Maryland were invited, resulting in the formation of a State Society of Graduate Nurses.

The general object of this society is to promote the welfare and uphold the honor of the nursing profession for the benefit of the public whom it serves, and its first step in this direction is the establishment of a standard of education, fitness, and ability, and through proper legislation and maintenance of such a standard. For this object a bill has been prepared by the society and submitted to the highest legal authority for revision. The substance of this bill, briefly stated, is as follows:

Prior to June 1, 1906, all nurses of good standing who answer to the following description may register without examination.

Graduates from all general hospitals giving a two-years' course; nurses having obtained an equivalent training in two or more hospitals; nurses graduated from special hospitals who shall obtain further training of one year in a general hospital; nurses graduating prior to 1897 from a general hospital giving one-year's course.

After June 1, 1906, a State examination will be required. Those then desiring to register as trained nurses must be twenty-three years of age, of good moral character; they must have received the equivalent of a high-school education, and have been graduated from a training-school connected with a hospital of good standing where three years of training and systematic instruction are given in the hospital.

The passage of this bill will not affect any persons nursing the sick who do not assume to be trained or registered nurses. It will, however, make it impossible for such persons to stand, as they do at present, on exactly the same

basis as the nurse who has given three years of hard work and study to obtain her profession.

It will make it impossible for the unqualified to assume that they are qualified, or for the unscrupulous to carry on freely a work which more than almost any other demands high character as a first requisite of those engaged in it.

The passage of this bill will be of importance, therefore, in protecting the nursing profession from the incompetent, ignorant, or unscrupulous to whom the work of nursing now offers a fair field with no restrictions. It is estimated that the number of untrained women (consisting to some extent of rejected probationers and dismissed pupils) who are actively engaged in the country is nearly three times as great as the number of regularly qualified nurses.

The chief benefit of this bill, however, will be to the public, in furnishing it with a means of discriminating between ability and incompetence; in supplying a guarantee that those who are known as registered nurses have furnished satisfactory evidences to the State of their fitness and ability to give efficient care to the sick. The passage of the bill must inevitably result in improvement in the education and training of nurses.

Those nurses who are anxious to uphold the honor and dignity of their profession, and to promote its usefulness in order that it may best minister to the needs of the community, should lose no opportunity to interest the public in what is really a measure of public importance. Most valuable help and support has been obtained in other States through physicians, patients, and friends, and no effort should be spared which can serve to make clear that for the safety of the people it is as important that a nurse should be able to show that she possesses the necessary skill, knowledge, and ability for her work as it is for a doctor, a lawyer, an engineer, or a pilot to do so.

The society in preparing this bill has done so with the hope of establishing such standards as will enable a nurse registered in the State of Maryland to command recognition and respect anywhere.

By order of the Board of Directors of the State Society.

SARAH F. MARTIN,

Superintendent the Robert Garrett Free Hospital for Children;

HELEN C. BARTLETT,

The Johns Hopkins Hospital Training-School Alumnae Association;

ELEANOR PARKER,

President the Baltimore City Hospital Training-School Alumnae Association,
Committee on Publication and Press.

COOPERATION AMONG DISTRICT NURSING ORGANIZATIONS.—In the early part of December an interesting conference was called in New York to consider the subject of district nursing and its problems and methods of service. This conference was under the auspices of the Philanthropic Committee of the Women's Conference of the Ethical Society, and interesting reports were read by Mrs. Hunter, a nurse attached to the Demilt Dispensary, by Mrs. Felix Adler, and others. Miss Lillian D. Wald, of the Nurses' Settlement, took an active part in the discussion, giving a resumé of the work done in the settlement; and there arose from the various reports and discussions an animated controversy in regard to the necessity of coöperation between the different organizations of the district nursing force, that there should be no overlapping in this kind of service and that all sections of the city should be carefully covered. As a result of this con-

ference a committee was appointed to provide, if possible, some means of more helpful coöperation between the various important centres of which Miss Wald and Miss Hitchcock were members.

The editor of *Charities* in commenting upon this conference says some good things in the interest of nurses, but we do not endorse the impression which he gives—that there is ever any unwillingness on the part of district nurses or any other nurses to work under the instruction of physicians. With this exception, the *Charities* comment is interesting, and we give it in full:

“Compared with utopian visions of the ideal commonwealth, the programme of the nurses is modest indeed; and yet the diligent and devoted nurse who goes in and out among the sick poor in her ministry of love is, of course, doing more to usher in the Kingdom of Heaven on earth than the prophet who predicts great commercial crises and industrial depressions and unemployment and hard times, and revels in his predictions; who flippantly charges that Christians pray that the Kingdom of God may come and vote against it; and who patronizingly hails the captains of industry and the organizers of trusts as promoters of socialism.

“The particular point of this discussion was the possibility of improving the present rather chaotic condition of district nursing in New York, which strikes us rather as a problem for administrative statesmanship and for mutual understanding among various agencies now partially occupying the field, than as a subject for joint debate. The long-standing controversy was reopened to some extent as to whether the district nurse is the doctor's nurse or the patient's nurse; whether the nurse is simply the absolute tool of the physician, doing what he directs and assuming no independent responsibility, or whether, on the other hand, nursing is a distinct profession, with its own legitimate sphere; whether, stating the issue in still another form, there is a place for the supervision of nurses by a superintending nurse, or whether all supervision should be from the physician in charge of each particular case. From one point of view it is a family quarrel with which the outside lay public is unconcerned; from another it is, however, of peculiar interest to the student of social evolution. What appears to be in process is the struggle for more complete recognition of a new and vigorous profession. It involves many subordinate issues. Regents' examination and registration of nurses is one of these—the New York law, which has recently gone into effect, being a distinct victory for the professional nurse. The possibility of raising the minimum standard of character and responsibility of the medical practitioners among the poor is another, which we specify with due fear and trembling, but with so much of courage, also, as is required to say it. There are, perhaps, among down-town physicians as high average standards as elsewhere, and certainly there are individual examples of professional skill, of personal integrity, and conscientious devotion which it would be impossible to surpass in the ranks of the medical profession. It remains true that there are some who are unfit and others who are unscrupulous. If district nursing had no other defence than that it mitigates somewhat the hardships of those of the sick who fall into the hands of the incompetent, the ignorant, and the dishonest practitioner, there would still be much to be said in its favor. A tactful nurse will, no doubt, even under such circumstances, preserve to some extent the fiction of working under the physician's direction; and those who can guide and prevent stupid blunders, and even prevent positive injuries, while still appearing to follow and to obey instructions, represent perhaps the flower of the nursing profession.”